

Iowa Department of Public Health Recruitment & Retention Workshop

Best Practices in Recruitment & Retention

December 1, 2010

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Iowa Dept of Public Health

Bureau of Health Care Access

- State Office of Rural Health
- Critical Access Hospital program
- Small Hospital Improvement Program
- Center for Health Workforce
 - Coordinate Health & Long Term Care Access Advisory Council
 - Central point of contact for health workforce issues in state
 - www.3rnet.org
 - PRIMECARRE loan repayment program
- Direct Care Worker Advisory Council and Workforce Initiative
- Primary Care Office
 - Health Professional Shortage Area Designations
 - NHSC loan repayment and scholar program
 - Iowa Collaborative Safety Net Provider Network
 - Work with state Federally Qualified Health Centers
 - State-funded mental health PA/NP fellowship programs
 - J-1 visa waiver program for international medical graduates

Health Professional Shortage Area Designations

Health Professional Shortage Areas

- Designation as a HPSA required for several types of recruitment/retention programs.
- US Health Resources and Services Administration (HRSA), Office of Shortage Designation, provides guidelines for determining federally qualified health professional shortage areas (HPSAs).
 - State Primary Care Offices analyze and submit requests for shortage designations to HRSA.
- Shortage designations indicate geographic areas with a shortage of primary care physicians, psychiatrists, and dental providers – according to HRSA.
- In Iowa, many of our shortage areas are entire counties, some are census tracts or groupings of census tracts or townships.

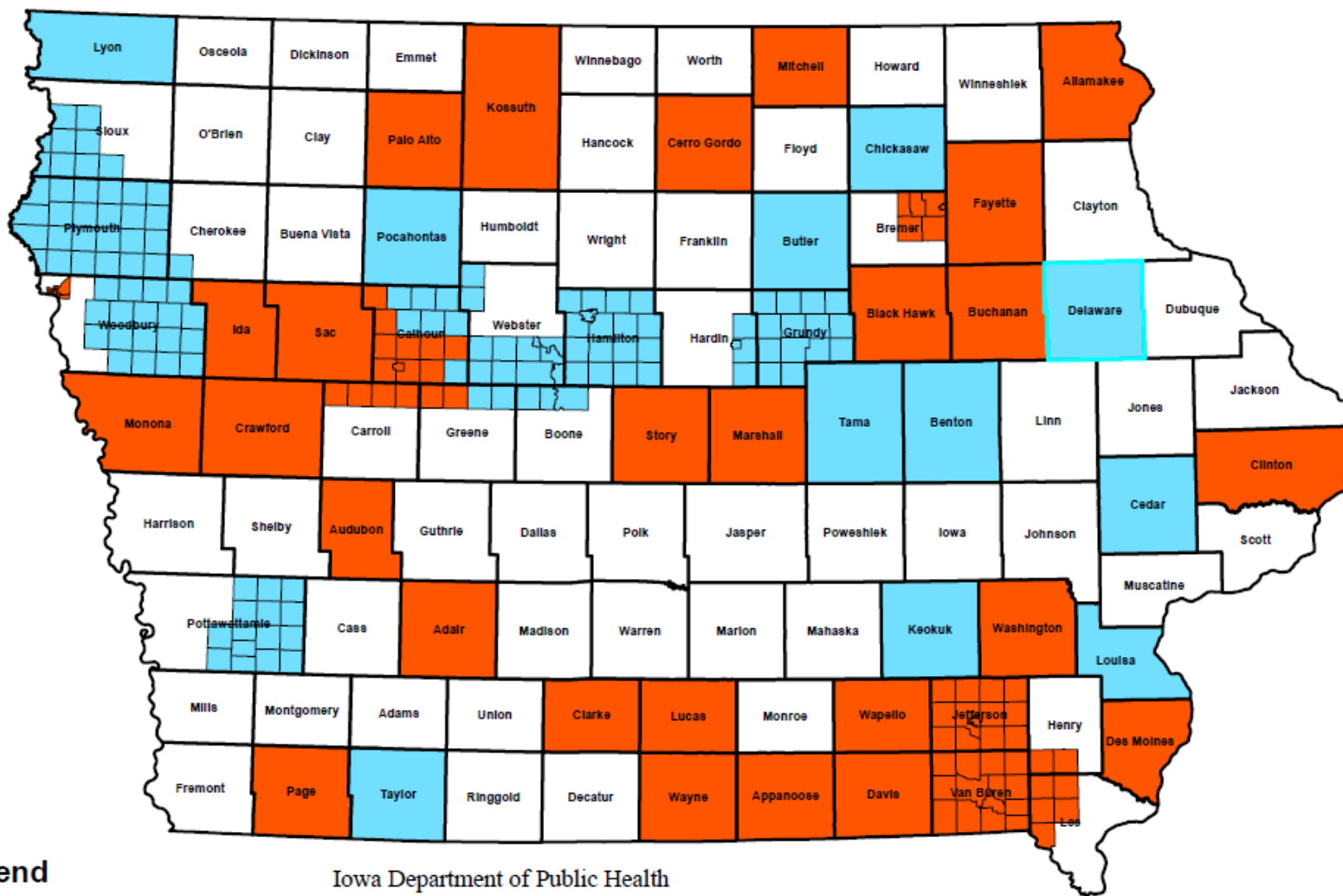
Types of Shortage Areas

- Health Professional Shortage Areas (HPSAs)
 - Refers to a shortage in a geographic area for primary care, dental care, or mental health care professionals
 - Primary care HPSA, Dental HPSA, mental health HPSA
- Medically Underserved Areas (MUAs) and Medically Underserved Populations (MUPs)
 - Refer to a specific population group in a defined area
- Facility HPSA designations
 - Specific to facilities that meet specific ratios of population to provider (example: prisons)
- Automatic HPSA designations
 - Provided to certain types of facilities that have difficulty recruiting but may not be physically located in a HPSA (example: Rural Health Clinics)




Shortage Designation & Program

Shortage Designation	Federal or State program requiring Shortage Designations				
	Nat'l Health Service Corps	State Loan Repayment PRIMECARRE	Federally Qualified Health Center	Rural Health Clinic	10% Medicare Bonus Payments to Physicians
Primary Care HPSA					
• Geographic HPSA	✓	✓		✓	✓
• Population HPSA	✓	✓		✓	
Dental Care HPSA					
• Geographic HPSA	✓	✓			
• Population HPSA	✓	✓			
Mental Health HPSA	✓	✓			
Medically Underserved Area or Population			✓	✓	
Automatic & Facility HPSAs (RHCs, FOHCs, & Correctional Facilities)	✓	✓			

Federal Primary Health Care Shortage Designations July 2010



Legend

-  County Boundaries
 Geographic
 Pop-Low Inc

Iowa Department of Public Health

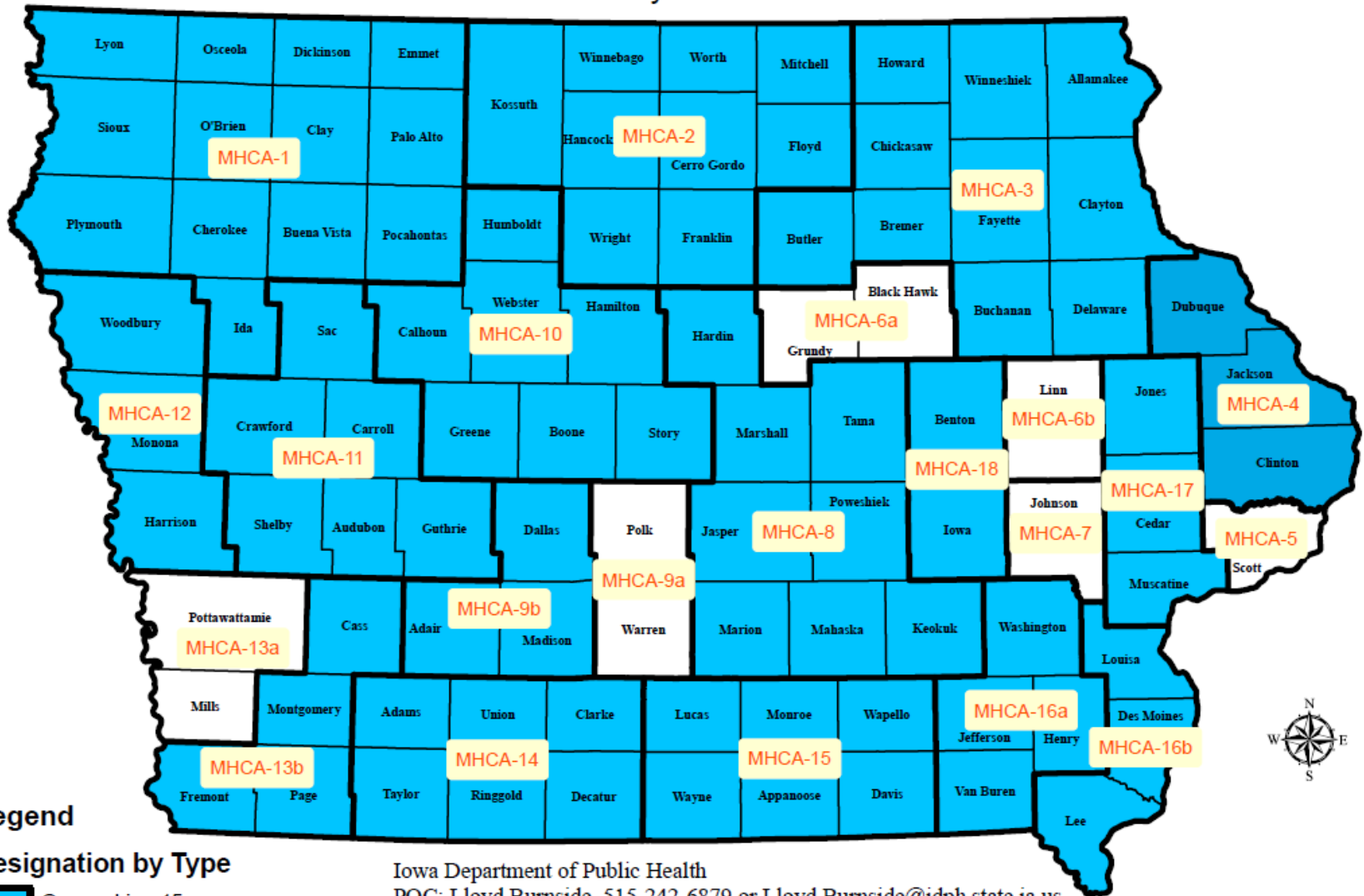
POC: Lloyd Burnside 515-242-6879 or Lloyd.Burnside@idph.state.ia.us

POC: Bobbi Buckner Bentz 515-281-7223 or Bobbi.Buckner@idph.state.ia.us

Disclaimer: This map is a snapshot of the Health Professional Shortage Area (HPSA) designations for Iowa as of 7/21/2010 and should not be used for the determination or approval of programs requiring a shortage designation. The official site for determination of shortages is: <http://hpsafind.hrsa.gov>.

Federal Mental Health Care Shortage Designations

July 2010



Legend

Designation by Type

- Geographis - 15
- Geographic High Need - 1
- Not Eligible - 6

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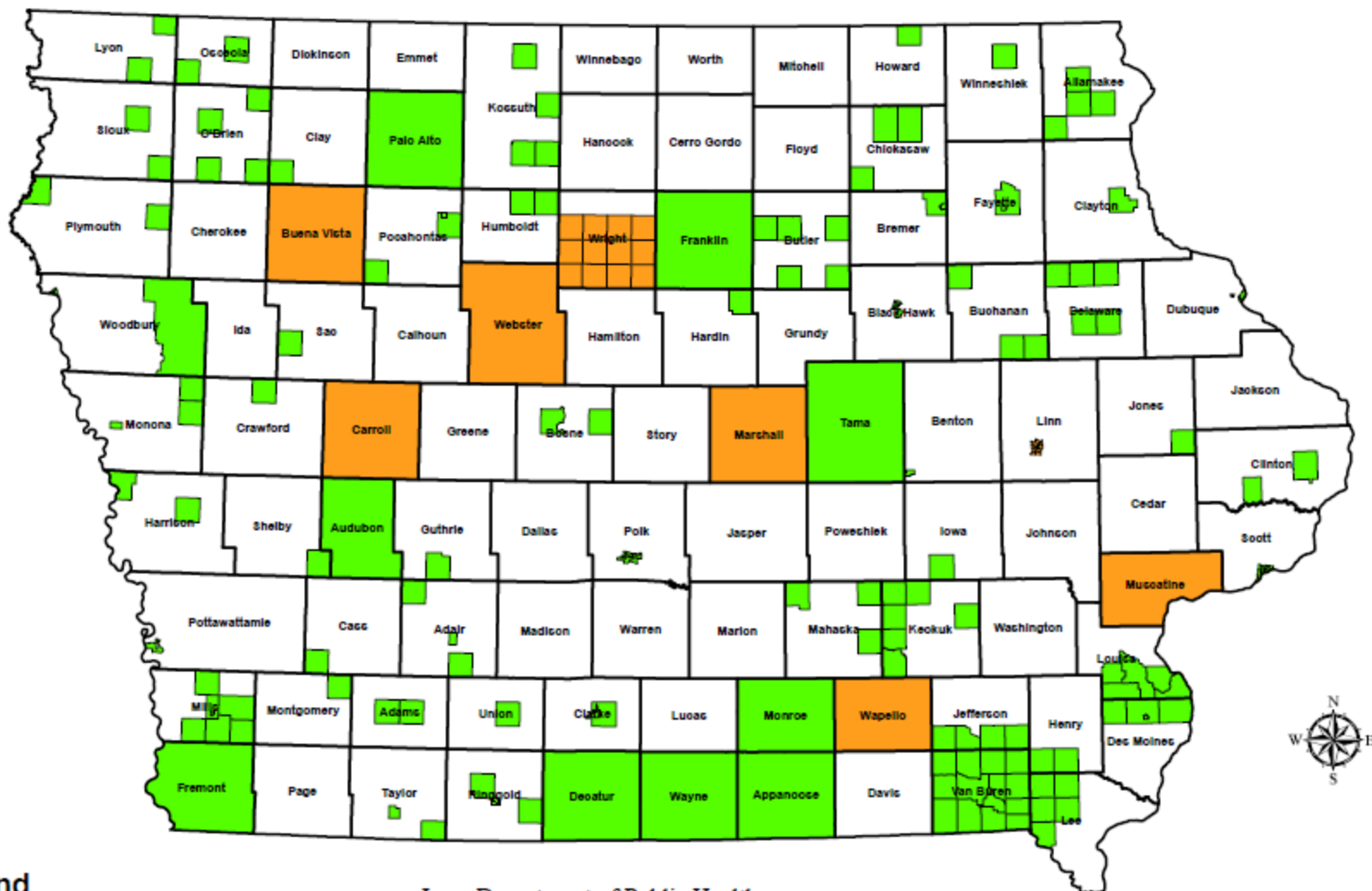
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The official web site for determination of shortages is : <http://hpsafind.hrsa.gov>.



Federal Medically Underserved Areas & Populations (MUA/Ps) July 2010



Legend

Number of Designations

- MUA - 76
- MUP - 7

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Disclaimer: This map is a snapshot of the Medically Underserved Areas & Populations (MUA/Ps) for Iowa as of 6/15/2010 and should not be used for the determination or approval of programs using a MUA designation. The official web site for determination of the MUA designation is: <http://muafind.hrsa.gov>.

Shortage Designation Issues

- HPSAs are required to be re-analyzed every 4 years for re-designation and de-designation.
- HPSAs also receive a “score” from HRSA to indicate the severity of the shortage...scores play into NHSC scholarship and at times loan repayment.
- Need cooperation and timely feedback from sites to determine appropriate FTE and number of extenders for accurate HPSA designations. Designations require feedback from 2/3 of all dental providers in service area.
- The designation occurs at a snapshot in time, every four years, although FTE is constantly changing.
- The PPACA requires HRSA to propose a new methodology for analyzing and designating HPSAs which could mean a whole new ballgame ~Summer 2011.

Loan Repayment Updates

National Health Service Corps & PRIMECARRE

NHSC & PRIMECARRE comparison

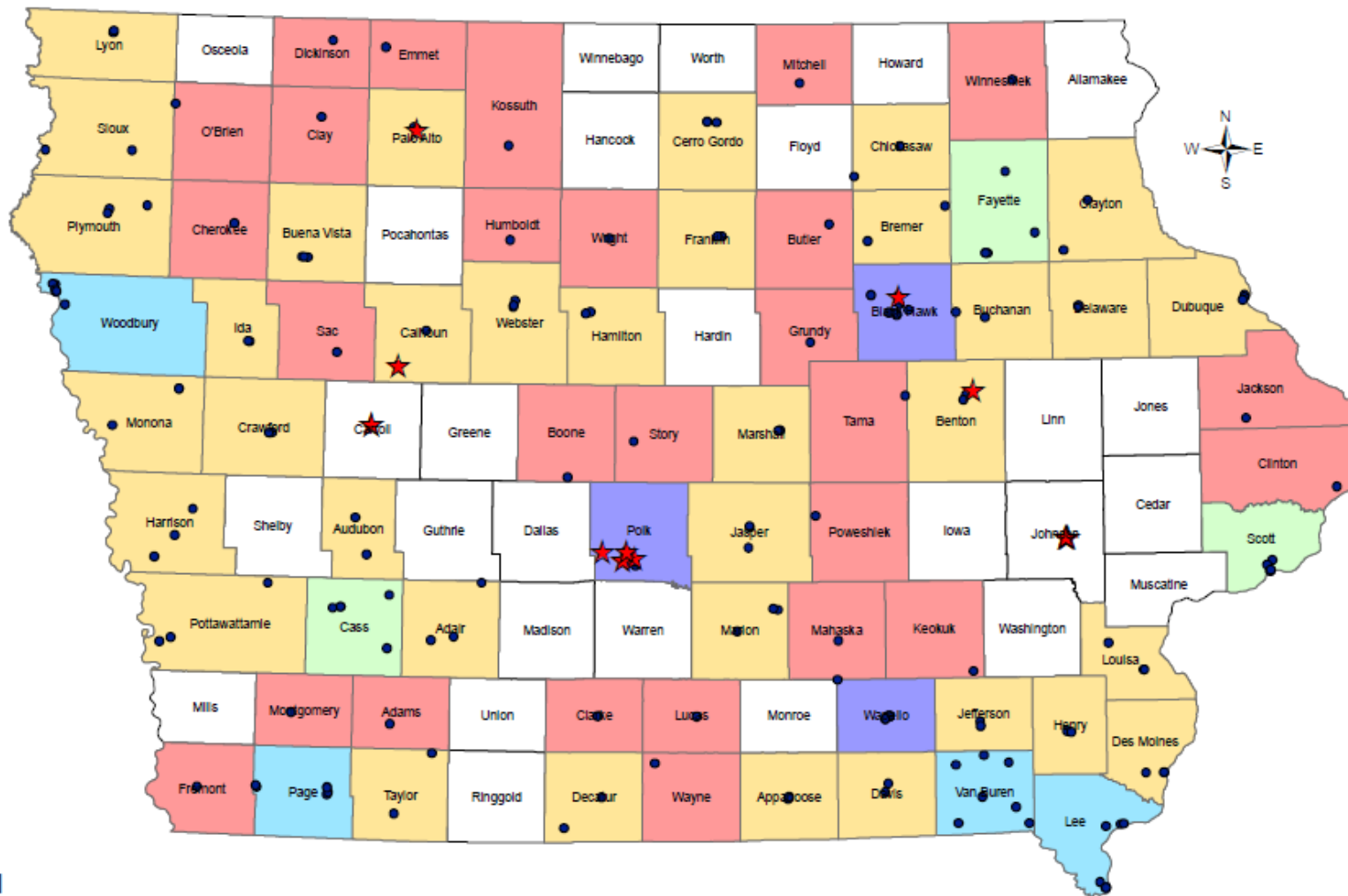
Both Programs: Clinician must be: working in a federally designated HPSA, US citizen, qualified student loan debt, cannot be fulfilling another obligation at the same time

NHSC	PRIMECARRE
On-line application opened November 22 nd 2010 through May 26 th 2011.	Application by RFP once per year available on IDPH website, application mailed to IDPH
Federally Administered	State Administered
All Federal Funds	1:1 State/Federal Funds
Requires Site Application	Does not require site application
Full time 2-year contract \$60,000 Half time 2-year contract \$30,000 Half time 4-year contract \$60,000	Full time 2-year contract up to \$60,000 depending on availability of funding and number of applicants
First Come, First Serve	Competitive Process with review committee
Can be For-Profit, Non-Profit, or Public Sites	Only Public or Non-Profit Site
Entire amount of funding provided to clinician at beginning of 2-year contract with NHSC	Half of funding provided at the end of each year of the 2-year contract with State of Iowa, funding goes through Iowa Student Aid Commission directly to lender
One-year continuations	Can re-apply in two-year increments

National Health Service Corps

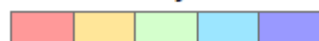
Sites by County

As of: November 8, 2010



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Sites in County - 72 Counties



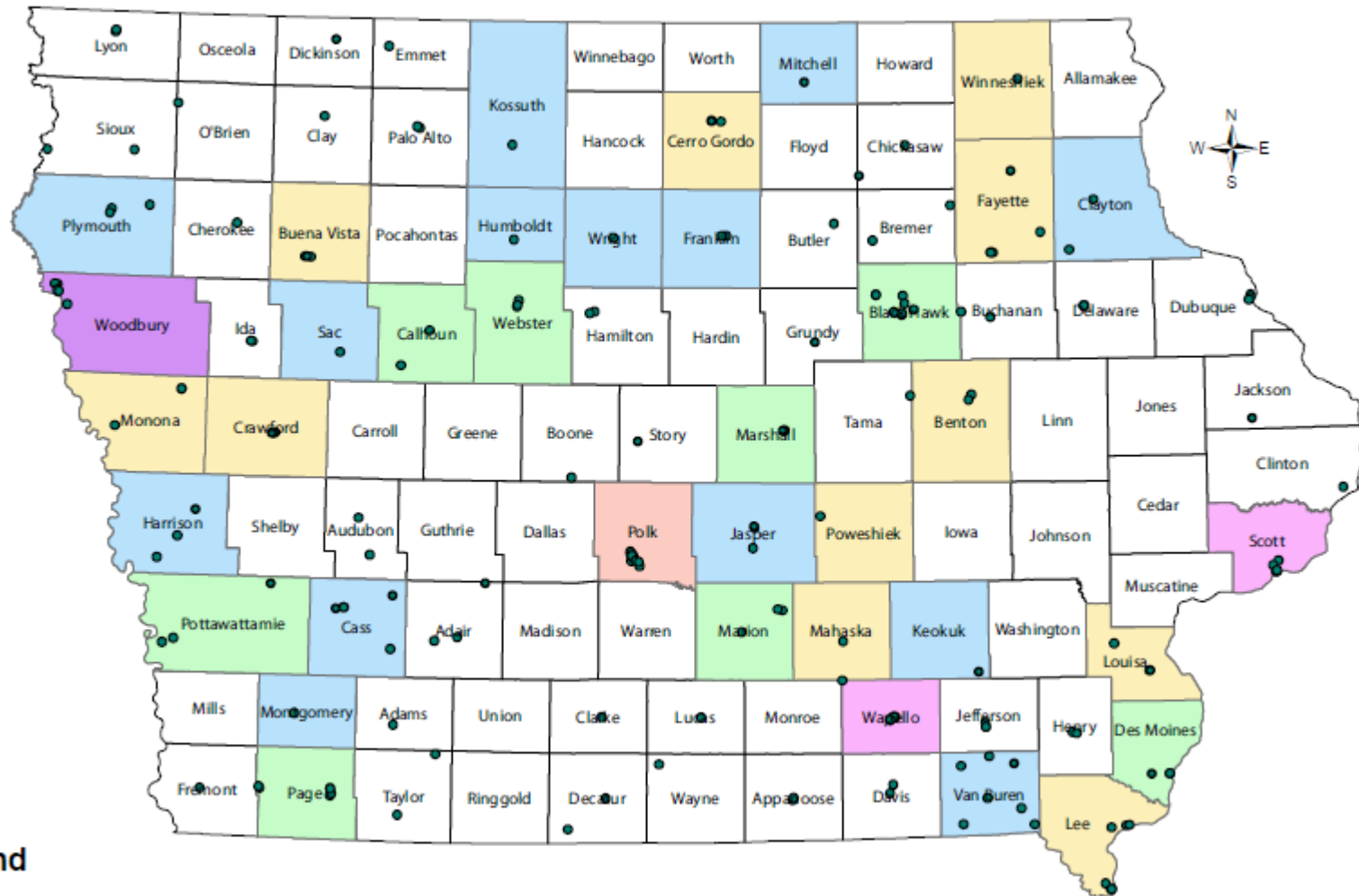
★ NHSC Ambassadors - 15

● NHSC Sites - 181

□ State and County Boundaries

National Health Service Corps Clinicians by County

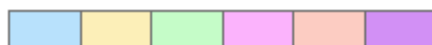
As of: November 24, 2010



Legend

Number of Clinicians

69 Clinicians at 57 Locations



• NHSC Site Locations - 181 Sites

State and County Boundaries

Source: U.S. Department of Health and Human Services; Health Resources and Services Administration; Bureau of Clinician Recruitment and Service
Prepared by: Iowa Department of Public Health, Bureau of Health Care Access

12/7/2010

PRIMECARRRE Awards Issued

2008-2010

Type of Professional	Number of Individuals Awarded	Total Amount Awarded (Federal and State Funding)
Nurse Practitioners	3	\$89,672
Nurse Midwife	1	\$30,000
Dentists	3	\$120,000
Physicians	5	\$285,570
Licensed Social Workers	2	\$73,845
Mental Health Counselors	2	\$59,450
Physician Assistants	4	\$130,756
Clinical Psychologists	2	\$120,000
Dental Hygienists	2	\$59,877
Total	24	\$969,170

Conrad 30/ J-1 Visa Waiver Program Update

Conrad 30/J-1 Visa waiver program

- State Primary Care Office utilizes Conrad 30 Program to support international medical graduates to practice in Iowa through a visa waiver.
- Physicians supported under J-1 visa waivers practice in Iowa for a minimum of 3 years.
- PCO has been using J-1 program since 1996.

Conrad 30 Program

- Through the State Conrad 30 program, designated state agencies can request for the 2 year home residency requirement to be waived...
 - In Iowa, the Primary Care Officer within IDPH is the authorized designee to submit waiver requests to the Department of State on behalf of a physician.
 - The US Dept of State reviews and sends the request to the United States Customs and Immigration Services (USCIS) for final determination.
 - The PCO receives a letter from USCIS with the final determination.
- Each state is allowed 30 waivers per federal fiscal year with the intent of directing physicians to underserved areas as designated as a HPSA, MUP, or MUA.
 - However, the reauthorization of the program 18 months ago allowed each state to use up to 10 of their 30 waivers in areas not designated as HPSAs.
- In return for granting a physician a waiver, the physician must work full-time in the designated area for a period of at least 3 years.
- The “countdown” of the 30 waiver slots begins October 1 of each year.

Iowa J-1 Waiver Program

The State of Iowa waiver policy:

- Some requirements are federal immigration requirements, others are state-policies/priorities that can be adjusted as need be.
- Prioritization of waiver requests based on:
 - Primary care specialty, including psychiatry
 - Rurality of practice site
 - Site status as an FQHC – hold slots for FQHCs until March 1 to allow for recruiting
- Sites must document an inability to recruit for a specific position for a period of at least 6 months.
- Sites must make an argument for the necessity of the provider including information on patients to be served, unmet need in that specialty, % of patient population with Medicaid, Medicare, or without insurance, etc.
- Iowa does not use many undesignated slots per year – 2-3.
- Waiver requests accepted on a federal fiscal year basis beginning October 1.
- Most years, allocate all 30 slots, thus must prioritize and turn down requests.

Review of 2009 and 2010 Allocated Waivers

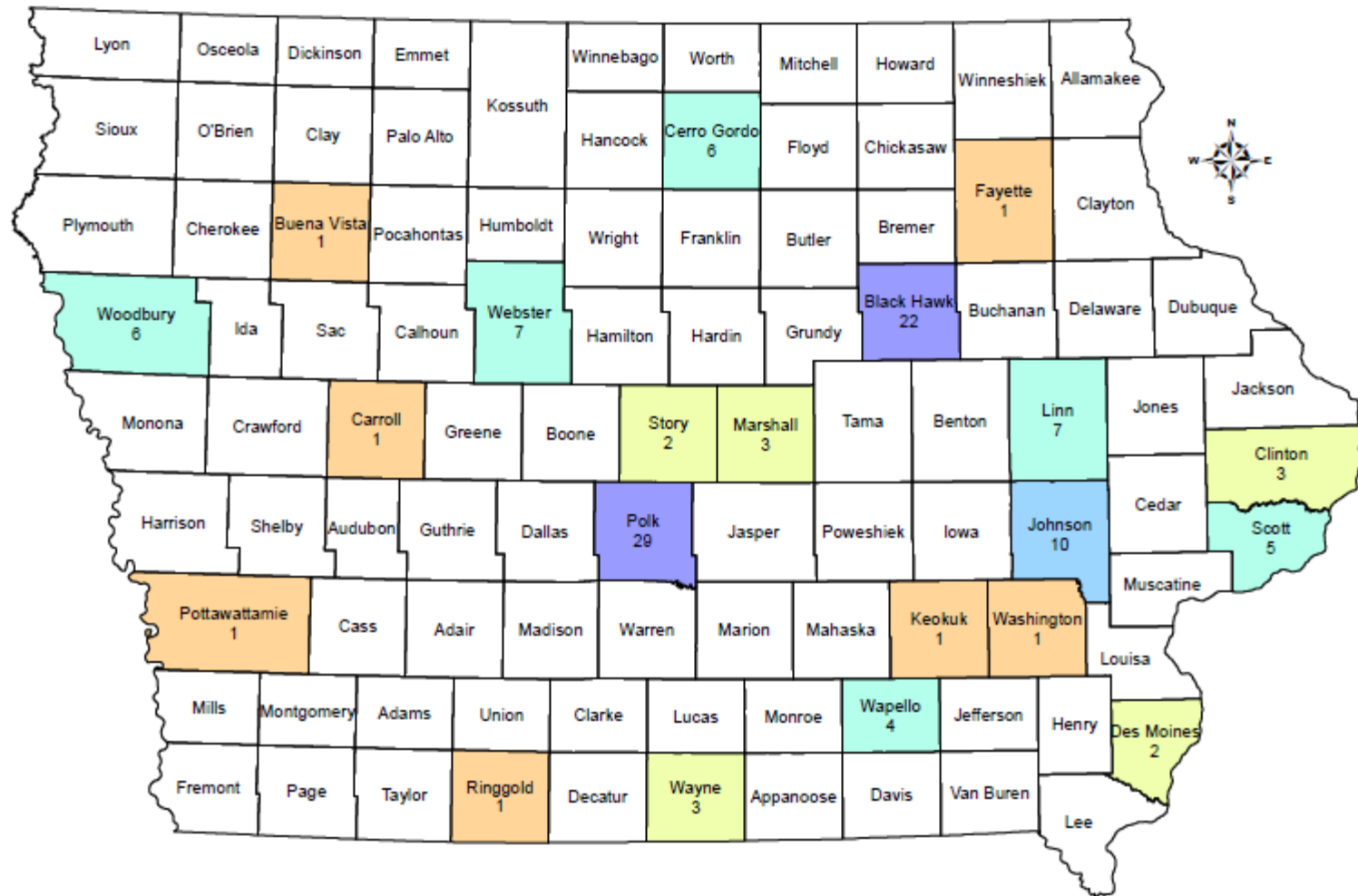
- 29 waivers supported in 2009
 - 15 waivers went to primary care physicians including family medicine (2), internal medicine (4), pediatrics (2), general surgery (2), obstetrics (1), and psychiatry (4).
 - 14 waivers went to specialists in a variety of areas – cardiology (2), neurology (3), nephrology (2), pulmonology (1), rheumatology (1), anesthesiology (1), pediatric gastroenterology (1), pediatric neurology (1), medical genetics (1), and an intensivist (1).
 - 8 waivers were provided to physicians to practice in rural areas and 21 waivers were provided to physicians to practice in more urban areas of Iowa – including Federally Qualified Health Centers (3) and the University of Iowa (3).
- 25 waivers supported in 2010
 - 10 waivers went to primary care physicians including family medicine (1), internal medicine (7), pediatrics (2)
 - 14 waivers went to specialists in a variety of areas – neurosurgery (1), Gastroenterology(1), hem/onc(1), Infectious disease(1), nephrology(2), cardiology(2), endocrinology(3), neurology(1), transplant surgery(1), other surgery(1).
 - 7 waivers were provided to physicians to practice in rural areas and 17 waivers were provided to physicians to practice in more urban areas of Iowa – including Federally Qualified Health Centers (2) and the University of Iowa (3).

2011 J-1 Waivers

- Began reviewing waiver applications October 1, 2010 for physicians who will begin in Summer 2011.
- Currently have approved 4 waivers.
- 5 waivers pending in Primary Care Office.
- Expecting 10 “incoming” waiver requests from sites who have already signed contracts and are gathering waiver paperwork.
- Potentially have 8 more “incoming” from sites who we are holding slots for or have extended a contract to a physician.
- 3 Slots Remaining!!

J-1 Visa Physician Placements

2007 through 2010 by County



Legend

J-1 Visa Placements 2007 - 2010



Map Symbols

State and County Borders

Source: Iowa Primary Care Office

Prepared by: Iowa Department of Public Health, Bureau of Health Care Access

Resources

- J-1 Waiver/NIW Policy Questions
 - Bobbi Buckner Bentz, Iowa Primary Care Office
 - 515-281-7223, bbuckner@idph.state.ia.us
- Access State Conrad 30/J-1 Visa Waiver Policy
 - http://www.idph.state.ia.us/hpcdp/common/pdf/health_care_access/j1_visa_waiver.pdf

Questions?!

Contact with further questions:

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Look up your site's HPSA information at:

<http://hpsafind.hrsa.gov/>